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APPLICATION NO.	FILING DATE		FIRST NAMED IN	IVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/831,899	05/24/2001	Gerard Re		naud	208822US6XPC	3169
TITLE OF INVENTION: C	OXYGEN INHALER MASK	WITH SOUND PI	CKUP DEVICE			·
APPLN. TYPE	SMALL ENTITY	ISSUE FEE		PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1400		\$0	\$1400	01/18/2006
EXAMINER		ART UNIT CLASS-SUBCLASS			,	
EREZO, DARWIN P		3731 128-206210				
1. Change of correspondence CFR 1.363). Change of correspon Address form PTO/SB/1 "Fee Address" indice PTO/SB/47; Rev 03-02 Number is required.	Correspondence	2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed. OBLON, SPIVAK, MCCLELLAND, MAIER 2 8 NEUSTADT, P.2.				
(A) NAME OF ASSIGNEE THOMSON-CSF SEXTANT			o assignee data will appear on the patent. If an assignee is identified below, the document has been form is NOT a substitute for filing an assignment 1/30/2005 MBEYENE2 00000026 09831899 (B) RESIDENCE: (CITY and STATE OR COUNTRY) Velizy Villacoublas, For Mance 30.00			1400.00 OP 30.00 OP
	te assignee category or category			<u> </u>	Corporation or other private	group entity Government
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a. Applicant claims	s (from status indicated abov SMALL ENTITY status. See	37 CFR 1.27.			MALL ENTITY status. See 37	
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